California



Stand-Alone Prescription Drug Plans

1-800-MEDICARE TTY 1-877-486-2048 www.medicare.gov



California 2007 Medicare Part D Stand-Alone Prescription Drug Plans

Data as of September 12, 2006. Includes all contracts/plans regardless of 2007 approval status. Employer sponsored plans (800 series) are excluded.

	Dian Name (and ID Numbers)		\$0 Premium with Full Low- Income Subsidy?			Annual Drug	
		A a		Offers Variable Co-	Monthly Drug		
O N		Daniella Time					
Company Name	Plan Name (and ID Numbers) Aetna Medicare Rx Essentials (S5810-066)	Benefit Type	Subsidy?	payments	Premium	Deductible	Gap
Aetna Medicare Blue Cross of California		Basic		•	\$24.80	\$200	
	Aetna Medicare Rx Plus (\$5810-168)	Enhanced		•	\$40.10	\$0	0 1
	Aetna Medicare Rx Premier (S5810-202)	Enhanced		•	\$67.30	\$0 *050	Generics
	Blue Cross MedicareRx Value (S5596-033)	Basic	•	•	\$19.00	\$250	
	Blue Cross MedicareRx Plus (S5596-034)	Enhanced		•	\$25.00	\$0	
	Blue Cross MedicareRx Gold (S5596-035)	Enhanced		•	\$34.60	\$0	Generics
Blue Shield of California	Blue Shield Medicare Rx Plan (S2468-002)	Basic		•	\$25.20	\$265	
	Blue Shield Medicare Rx Enhanced Plan (S2468-001)	Enhanced		•	\$36.30	\$0	
Bravo by Elder Health	Bravo Rx II (S5998-013)	Basic			\$21.80	\$265	
	Bravo Rx I (S5998-014)	Basic		•	\$29.20	\$0	
CIGNA HealthCare	CIGNATURE Rx Value Plan (S5617-158)	Basic	•	•	\$20.10	\$265	
	CIGNATURE Rx Plus Plan (S5617-160)	Enhanced		•	\$27.90	\$0	
	CIGNATURE Rx Complete Plan (S5617-202)	Enhanced		•	\$37.40	\$0	Generics
Coventry AdvantraRx	AdvantraRx Value (S5674-056)	Enhanced		•	\$23.70	\$0	
	AdvantraRx Premier (S5674-057)	Basic		•	\$34.90	\$0	
	AdvantraRx Premier Plus (S5674-059)	Enhanced		•	\$46.00	\$0	Generics
EnvisionRx Plus	EnvisionRxPlus Standard (S7694-032)	Basic			\$42.50	\$265	
	EnvisionRxPlus Gold (S7694-066)	Enhanced		•	\$58.50	\$0	Generics
First Health Part D	First Health Select (S5768-079)	Basic		•	\$36.00	\$0	
Health Net	Health Net Orange Option 1 (\$5678-002)	Basic	•	•	\$19.90	\$265	
	Health Net Orange Option 2 (S5678-008)	Basic	-	•	\$27.00	\$0	
	Health Net Orange Option 3 (\$5678-070)	Enhanced		•	\$37.60	\$0	Generics
HealthSpring Prescription Drug Plan	HealthSpring Prescription Drug Plan-Reg 32 (S5932-031)	Basic			\$22.90	\$265	001101100
Humana Insurance Company	Humana PDP Standard S5884-090 (S5884-090)	Basic	•		\$15.70	\$265	
	Humana PDP Enhanced S5884-030 (S5884-030)	Enhanced	<u> </u>	•	\$23.10	\$0	
	Humana PDP Complete S5884-060 (S5884-060)	Enhanced		•	\$80.90	\$0	Generics
Medco YOURx PLAN	Medco YOURx PLAN (S5660-032)	Basic		•	\$31.70	\$100	OCHCICS
MEMBERHEALTH	Community Care Rx BASIC (\$5803-101)	Basic		•	\$23.30	\$265	
MEMBERITEALTT	Community Care Rx CHOICE (S5803-169)	Enhanced		•	\$31.30	\$0	
	Community Care Rx GOLD (S5803-249)	Enhanced		•	\$37.70	\$0	Generics
NMHC Group Solutions	NMHC Medicare PDP Gold (S8841-032)	Basic		•	\$29.10	\$0	Generics
Pennsylvania Life Insurance Company	Prescription Pathway Gold Plan Reg 32 (S5597-064)	Enhanced			\$20.20	\$0	
	Prescription Pathway Bronze Plan Reg 32 (\$5597-004)	Basic		•	\$20.20	\$265	
						\$200	C
DyAmoriaa	Prescription Pathway Platinum Plan Reg 32 (S5597-229)	Enhanced		•	\$38.80		Generics
RxAmerica	Advantage Star Plan by RxAmerica (S5644-084)	Basic	•	•	\$18.50	\$265	
0.4444	Advantage Freedom Plan by RxAmerica (S5644-064)	Basic		•	\$23.40	\$265	
SAMAscript	SAMAScript (S7950-032)	Basic			\$45.70	\$265	
SierraRx	SierraRx (S5917-008)	Basic		•	\$22.40	\$265	
	SierraRx Basic (S5917-033)	Basic			\$22.60	\$265	
	SierraRx Plus (S5917-058)	Enhanced		•	\$74.80	\$0	All Formulary Drugs

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Company Name	Plan Name (and ID Numbers)	Benefit Type	\$0 Premium with Full Low- Income Subsidy?	Offers Variable Co- payments	Monthly Drug Premium	Annual Drug Deductible	Type of Extra Coverage Offered in the Gap
SilverScript	SilverScript (S5601-064)	Basic		•	\$24.30	\$265	
	SilverScript Plus (S5601-065)	Enhanced		•	\$35.90	\$0	
	SilverScript Complete (S5601-103)	Enhanced		•	\$41.20	\$0	Generics
Unicare	MedicareRx Rewards Value (S5960-032)	Basic	•	•	\$17.70	\$265	
	MedicareRx Rewards Premier (S5960-102)	Enhanced		•	\$36.20	\$0	Generics
United American Insurance Company	UA Medicare Part D Rx Covg - Silver Plan (S5755-070)	Basic			\$27.90	\$265	
	UA Medicare Part D Prescription Drug Cov (S5755-035)	Enhanced		•	\$37.10	\$0	
UnitedHealthcare	AARP MedicareRx Plan - Saver (S5921-001)	Basic	•	•	\$9.80	\$265	
	AARP MedicareRx Plan (S5820-031)	Basic		•	\$24.70	\$0	
	UnitedHealth Rx Basic (S5921-002)	Basic		•	\$25.90	\$0	
	UnitedHealth Rx Extended (S5820-135)	Enhanced		•	\$39.30	\$0	
	AARP MedicareRx Plan - Enhanced (S5921-003)	Enhanced		•	\$42.30	\$0	Generics
WellCare	WellCare Classic (S5967-169)	Basic	•	•	\$9.70	\$265	
	WellCare Signature (S5967-066)	Basic	•	•	\$18.20	\$0	
	WellCare Complete (S5967-101)	Enhanced		•	\$35.50	\$0	Generics